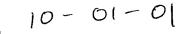
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UTILITY **PATENT APPLICATION TRANSMITTAL**

Attorney Docke	t No.	42390P11381
First Inventor	Patric	k L. Connor

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6	for new nonprov	visional applications under 37 CFR 1.5	(3(b)) Expres	ss Mail Label 1	6. EL62519.	5785US			28	
Sec		APPLICATION ELEME ter 600 concerning utility patent a			DDRESS TO:	Box Pater	Commission on Application on, DC 202		j1011	
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2. []	See 37 C	T.	otal Pages <u>28</u>] v)		cleotide and/or Am applicable, all nec	nino Acid Sequ essary) Readable Forn	n (CRF)	ission		
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	-	und of the Invention mary of the Invention			ACCOMPANYING APPLICATION PARTS					
	DetailedClaim(s)	scription of the Drawings (if fi Description	iled)	9. □	Assignment Pap 37 C.F.R. § 3.73 (when there is a	3(b) Statement		nent(s)) Power of Attorn	ney	
	- Abstract	of the Disclosure		11.	English Translat	tion Document	(if applicab	le)		
4. 🗷	Drawing(s	s) (35 U.S.C. 113) [Total She	eets 8]	12.	Information Disc Statement (IDS)		×	Copies of IDS Citations		
5. C	ath or Decla	(rotar a	~ —	13.	Preliminary Ame	endment				
	a. Newly executed (original or copy) b. Copy from a prior application (37 C.F.R. § 1.63(d))			3(d)) 14. 🗖	Return Receipt Postcard (MPEP 503) (Should be specifically itemized)					
i. DELETION OF INVENTOR(S)			15. D	Certified Copy of Priority Document(s) (if foreign priority is claimed)						
		Signed statement attached delet named in the prior application, so 1.63(d)(2) and 1.33(b). signed		16. □	Request and Ce Applicant must a	ertification unde).	
6. C		on Data Sheet. See 37 CFR	1.76	17. 🗖	Other:					
18. If a	_	ING APPLICATION, check a					f in a prelim	inary amendme	ent:	
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1		tion Information: Examiner				Group/Art U				
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Kerry D. Tweet

Name (Print/Type)

Signature

Registration No. (Attorney/Agent)

45,959

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FEE TRANSMITTAL for FY 2000

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT 1,666.00 (\$)

Complete if Known				
Application Number				
Filing Date	September 27, 2001			
First Named Inventor	Patrick L. Connor			
Examiner Name				
Group/Art Unit Attorney Docket No.	42390P11381			

METHOD OF PAYMENT (check one)	FEE CALCULATION (continued)						
1. The Commissioner is hereby authorized to	3. ADDITIONAL FEE						
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EXTRA CLAIM FEES Extra Fee from	143 440			Design issue fee	9		
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**or number previously paid, if greater, For Reissues, see below Large Entity Small Entity	581 40	581		Recording each property (times	number of pro	perties)	
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Code (\$) Code (\$) 103 18 203 9 Claims in excess of 20	149 710	249		For each addition		to be	
102 80 202 40 Independent claims in excess of 3				examined (37 C	FR § 1.129(b))	
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SUBTOTAL (2) (\$) 956.00	*Reduced by Ba		ee Pa	id SL	IBTOTAL (3)	(\$)	
SUBMITTED BY					Compl	ete (if applica	
Name (Print/Type) Kerry D. Tweet	Registrati (Attorney/Ag		4	5,959	Telephone	(503) 684	-6200
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09/27/01 Signature Date

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